

Fill in this information to identify your case and this filing:

Debtor 1	<b>Bige</b>	<b>Monyea</b>	<b>Chambers</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Eastern</b>		District of <b>Pennsylvania</b>
Case number	<b>24-10788</b>		

☐ Check if this is an amended filing

## Official Form 106A/B

## Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1:** Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.
- ☐ Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here →

\$0.00

**Part 2:** Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
- ☒ Yes

3.1 Make: **Maserati** Who has an interest in the property? Check one.Model: **Levante**Year: **2018**Approximate mileage: **84000**

Other information:

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$15,668.00

Current value of the portion you own?

\$15,668.00

If you own or have more than one, describe here:

Debtor **Chambers, Bige Monyea**Case number (if known) **24-10788**

- 3.2 Make: Maserati Who has an interest in the property? Check one.
- Model: Ghibli ☒ Debtor 1 only
- Year: 2015 ☐ Debtor 2 only
- Approximate mileage: 72677 ☐ Debtor 1 and Debtor 2 only
- Other information: ☐ At least one of the debtors and another
- ☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$7,824.00

Current value of the portion you own?

\$7,824.004. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
- ☐ Yes

5. **Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here** →\$23,492.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
- ☒ Yes. Describe. ....

Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.

\$950.007. **Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☐ No
- ☒ Yes. Describe. ....

Various used televisions, mobile devices, and computers, each valued at \$600 or less.

\$350.008. **Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☒ No
- ☐ Yes. Describe. ....

9. **Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☒ No
- ☐ Yes. Describe. ....

Debtor **Chambers, Bige Monyea**

Case number (if known) **24-10788**

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

- ☒ No  
☐ Yes. Describe. ....

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- ☐ No  
☒ Yes. Describe. ....

Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.

**\$250.00**

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- ☐ No  
☒ Yes. Describe. ....

Various used pieces of jewelry.

**\$75.00**

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

- ☒ No  
☐ Yes. Describe. ....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

- ☒ No  
☐ Yes. Give specific information. ....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** →

**\$1,625.00**

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☒ No  
☐ Yes ..... Cash: .....

Debtor **Chambers, Bige Monyea**Case number (if known) **24-10788****17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes .....

Institution name:

17.1. Checking account:	<u>Navy Federal Credit Union</u>	<u>\$1,057.59</u>
17.2. Checking account:	<u>Police and Fire Federal Credit Union</u>	<u>\$3,783.48</u>
17.3. Checking account:	<u>WSFS Bank</u>	<u>(\$318.15)</u>
17.4. Savings account:	<u>Navy Federal Credit Union</u>	<u>\$1,050.47</u>
17.5. Savings account:	<u>Police and Fire Federal Credit Union</u>	<u>\$504.18</u>

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes .....**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☐ No☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

<u>Acollective Consulting, LLC</u>	<u>100.00%</u>	<u>\$21,235.51</u>
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**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific information about them.....**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No☐ Yes. List each account separately.**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No☐ Yes .....

Debtor **Chambers, Bige Monyea**

Case number (if known) **24-10788**

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

- ☒ No  
☐ Yes .....

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No  
☐ Yes .....

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- ☒ No  
☐ Yes. Give specific information about them. ...

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No  
☐ Yes. Give specific information about them. ...

27. **Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No  
☐ Yes. Give specific information about them. ...

**Money or property owed to you?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

- ☒ No  
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

29. **Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No  
☐ Yes. Give specific information. ....

30. **Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No  
☐ Yes. Give specific information. ....

Debtor **Chambers, Bige Monyea**Case number (if known) **24-10788****31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☒ No☐ Yes. Name the insurance company  
of each policy and list its value. ...**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information. ....**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim. ....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim. ....**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information. ....**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here****\$27,313.08****Part 5:** Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here****\$0.00****Part 6:** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**☒ No. Go to Part 7.☐ Yes. Go to line 47.**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here****\$0.00****Part 7:** Describe All Property You Own or Have an Interest in That You Did Not List Above**53. Do you have other property of any kind you did not already list?***Examples:* Season tickets, country club membership

Debtor **Chambers, Bige Monyea**

Case number (if known) **24-10788**

- ☒ No  
☐ Yes. Give specific information. ....

54. Add the dollar value of all of your entries from Part 7. Write that number here ..... → \$0.00

**Part 8:** List the Totals of Each Part of this Form

55. **Part 1: Total real estate, line 2** ..... → \$0.00

56. **Part 2: Total vehicles, line 5** \$23,492.00

57. **Part 3: Total personal and household items, line 15** \$1,625.00

58. **Part 4: Total financial assets, line 36** \$27,313.08

59. **Part 5: Total business-related property, line 45** \$0.00

60. **Part 6: Total farm- and fishing-related property, line 52** \$0.00

61. **Part 7: Total other property not listed, line 54** + \$0.00

62. **Total personal property.** Add lines 56 through 61. .... \$52,430.08 Copy personal property total → + \$52,430.08

63. **Total of all property on Schedule A/B.** Add line 55 + line 62. .... \$52,430.08

Fill in this information to identify your case:

Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Pennsylvania</u>		
Case number (if known)	<u>24-10788</u>		

☐ Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: 2018 Maserati Levante	\$15,668.00	<input checked="" type="checkbox"/> \$0.00	11 U.S.C. § 522(d)(2)
Line from Schedule A/B: 3.1		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
		<input checked="" type="checkbox"/> \$0.00	11 U.S.C. § 522(d)(5)
		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: 2015 Maserati Ghibli	\$7,824.00	<input checked="" type="checkbox"/> \$4,450.00	11 U.S.C. § 522(d)(2)
Line from Schedule A/B: 3.2		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
		<input checked="" type="checkbox"/> \$3,374.00	11 U.S.C. § 522(d)(5)
		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	



Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>	Case number (if known) <u>24-10788</u>
	First Name	Middle Name	Last Name	

Part 2: Additional Page

3. **Are you claiming a homestead exemption of more than \$189,050?**

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

Debtor 1	<b>Bigge</b>	<b>Monyea</b>	<b>Chambers</b>	Case number (if known) <u>24-10788</u>
	First Name	Middle Name	Last Name	

**Part 2:** Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.	\$950.00	<input checked="" type="checkbox"/> \$950.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: <u>6</u>			
Brief description: Various used televisions, mobile devices, and computers, each valued at \$600 or less.	\$350.00	<input checked="" type="checkbox"/> \$350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: <u>7</u>			
Brief description: Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$250.00	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: <u>11</u>			
Brief description: Various used pieces of jewelry.	\$75.00	<input checked="" type="checkbox"/> \$75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Line from Schedule A/B: <u>12</u>			
Brief description: Navy Federal Credit Union Checking account	\$1,057.59	<input checked="" type="checkbox"/> \$1,057.59 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: <u>17</u>			
Brief description: Navy Federal Credit Union Savings account	\$1,050.47	<input checked="" type="checkbox"/> \$1,050.47 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: <u>17</u>			
Brief description: Police and Fire Federal Credit Union Checking account	\$3,783.48	<input checked="" type="checkbox"/> \$3,783.48 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: <u>17</u>			

Debtor 1 **Bige** **Monyea** **Chambers** Case number (if known) 24-10788  
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Police and Fire Federal Credit Union Savings account Line from Schedule A/B: 17	\$504.18	<input checked="" type="checkbox"/> \$504.18 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: WSFS Bank Checking account Line from Schedule A/B: 17	(\$318.15)	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Acollective Consulting, LLC Line from Schedule A/B: 19	\$21,235.51	<input checked="" type="checkbox"/> \$5,655.28 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

Fill in this information to identify your case:

Debtor 1 Bige Monyea Chambers  
 First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number (if 24-10788  
 known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

## 1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

## Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Column C

Unsecured portion  
If any

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
<b>2.1</b> Ally Financial, Inc Creditor's Name 500 Woodward Ave Number Street _____ Detroit, MI 48226-3416 City State ZIP Code <b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>2/1/2020</u> Last 4 digits of account number <u>4 9 4 7</u>	<b>Describe the property that secures the claim:</b> <u>\$33,947.00</u> 2018 Maserati Levante <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<u>\$15,668.00</u>	<u>\$18,279.00</u>

Add the dollar value of your entries in Column A on this page. Write that number here:

\$33,947.00

Debtor 1

**Bige**

**Monyea**

**Chambers**

Case number (if known) 24-10788

First Name

Middle Name

Last Name

	Additional Page	Column A	Column B	Column C
Part 1:	<b>Amount of claim</b> Do not deduct the value of collateral.	<b>Value of collateral that supports this claim</b>	<b>Unsecured portion</b> If any	
<b>2.2</b>	<p><b>After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.</b></p> <hr/> <p><b>Describe the property that secures the claim:</b></p> <p>Creditor's Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p><b>Who owes the debt?</b> Check one.</p> <p> <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim relates to a community debt                 </p> <p>Date debt was incurred _____ Last 4 digits of account number _____</p>			
	<p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p> <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed                 </p> <p><b>Nature of lien.</b> Check all that apply.</p> <p> <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____                 </p>			
	<b>Add the dollar value of your entries in Column A on this page. Write that number here:</b>	\$0.00		
	<b>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</b>	\$33,947.00		

Fill in this information to identify your case:

Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern</u>	District of	<u>Pennsylvania</u>
Case number (if known)	<u>24-10788</u>		

☐ Check if this is an amended filing

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.  
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount

<u>2.1</u>	Internal Revenue Service	Last 4 digits of account number <u>      </u>	<u>\$353,075.92</u>	<u>\$353,075.92</u>	<u>\$0.00</u>
	Priority Creditor's Name	When was the debt incurred? <u>      </u>			
	Centralized Insolvency Operation				
	PO Box 7346				
	Number Street	As of the date you file, the claim is: Check all that apply.			
	Philadelphia, PA 19101-7346	<input type="checkbox"/> Contingent			
	City State ZIP Code	<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Domestic support obligations			
	<input type="checkbox"/> Debtor 2 only	<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government			
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other. Specify <u>      </u>			
	<input type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				

Debtor 1

**Bige****Monyea****Chambers**Case number (if known) 24-10788

First Name

Middle Name

Last Name

**Part 1: Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

**Total claim****Priority  
amount****Nonpriority  
amount**

<b>2.2</b>	Pennsylvania Department of Revenue	<b>Last 4 digits of account number</b>	____	<b>\$19,128.87</b>	<b>\$19,128.87</b>
	Priority Creditor's Name	<b>When was the debt incurred?</b>	_____		
	Bankruptcy Division				
	1 Revenue PI				
	Number Street	<b>As of the date you file, the claim is:</b> Check all that apply.			
	Harrisburg, PA 17129-0001	<input type="checkbox"/> Contingent			
	City State ZIP Code	<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
	<b>Who incurred the debt?</b> Check one.	<b>Type of PRIORITY unsecured claim:</b>			
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Domestic support obligations			
	<input type="checkbox"/> Debtor 2 only	<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government			
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other. Specify _____			
	<input type="checkbox"/> Check if this claim is for a community debt				
	<b>Is the claim subject to offset?</b>				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				

Debtor 1

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**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

				Total claim
<b>4.1</b>	Capital One	Last 4 digits of account number	<u>4 8 9 0</u>	<u>\$2,613.00</u>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>Attn: Bankruptcy</u>		<u>11/1/2023</u>		
<u>PO Box 30285</u>		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
<u>Salt Lake City, UT 84130-0285</u>		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
<b>4.2</b>	Capital One	Last 4 digits of account number	<u>9 8 2 8</u>	<u>\$9.00</u>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>Attn: Bankruptcy</u>		<u>11/1/2019</u>		
<u>PO Box 30285</u>		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
<u>Salt Lake City, UT 84130-0285</u>		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				



Debtor 1

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**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.3</b>	<b>Channel Partners Capital, LLC</b> Nonpriority Creditor's Name <b>Channel Partners Equipment Finance</b> 10900 Wayzata Blvd Ste 300 Number Street Minnetonka, MN 55305-1576 City State ZIP Code	<b>Last 4 digits of account number</b> _____ <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Guarantor on Vehicle Loan for Business</u>	<b>\$53,595.58</b>
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.4</b>	<b>Comenity Bank/Victoria Secret</b> Nonpriority Creditor's Name Attn: Bankruptcy PO Box 182125 Number Street Columbus, OH 43218 City State ZIP Code	<b>Last 4 digits of account number</b> <u>1</u> <u>2</u> <u>2</u> <u>2</u> <b>When was the debt incurred?</b> <u>7/1/2015</u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>UnknownLoanType</u>	<b>\$100.00</b>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

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**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.5</b>	Commercial Acceptance Company Nonpriority Creditor's Name Attn: Bankruptcy Attn: Bankruptcy 2300 Gettysburg Road , Suite 102 Number Street Camp Hill, PA 17011 City State ZIP Code	Last 4 digits of account number <u>8 6 7 8</u> When was the debt incurred? <u>12/1/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,643.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CollectionAttorney</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.6</b>	Credit One Bank Nonpriority Creditor's Name Attn: Bankruptcy 6801 S Cimarron Rd Number Street Las Vegas, NV 89113-2273 City State ZIP Code	Last 4 digits of account number <u>0 4 4 4</u> When was the debt incurred? <u>2/1/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$39.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.7</b>	Cws/cw Nexus Nonpriority Creditor's Name Po Box 9201 Number Street Old Bethpage, NY 11804 City State ZIP Code	Last 4 digits of account number <u>7 8 6 3</u> When was the debt incurred? <u>7/1/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$311.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

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**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.8</b>	Fnb Of Wyomn Nonpriority Creditor's Name 838 N Market Number Street Wilmington, DE 19899 City State ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7 3 0 8</u> <b>When was the debt incurred?</b> <u>5/1/2021</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	<u>\$3,745.00</u>
<b>4.9</b>	Fortiva Nonpriority Creditor's Name Attn: Bankruptcy PO Box 105555 Number Street Atlanta, GA 30348-5555 City State ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3 3 8 4</u> <b>When was the debt incurred?</b> <u>4/1/2020</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	<u>\$6.00</u>
<b>4.10</b>	James P. Duffy Nonpriority Creditor's Name 1120 Clover Ln Number Street Glen Mills, PA 19342-9622 City State ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Default Judgment</u>	<u>\$1,134,983.10</u>

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**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.11</b>	Kohl's Nonpriority Creditor's Name Attn: Credit Administrator PO Box 3043 Number Street Milwaukee, WI 53201-3043 City State ZIP Code	Last 4 digits of account number <u>1 7 6 1</u> When was the debt incurred? <u>10/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$78.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.12</b>	Mariner Finance, LLC Nonpriority Creditor's Name Attn: Bankruptcy 8211 Town Center Drive Number Street Nottingham, MD 21236 City State ZIP Code	Last 4 digits of account number <u>6 0 1 4</u> When was the debt incurred? <u>6/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,726.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.13</b>	Mercury/FBT Nonpriority Creditor's Name Attn: Bankruptcy PO Box 84064 Number Street Columbus, GA 31908 City State ZIP Code	Last 4 digits of account number <u>5 5 6 8</u> When was the debt incurred? <u>5/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$918.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

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**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.14</b>	Mission Lane LLC Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 105286 Number Street Atlanta, GA 30348 City State ZIP Code	Last 4 digits of account number <u>9 2 7 6</u> When was the debt incurred? <u>3/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$123.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.15</b>	Pentagon Federal Credit Union Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 1432 Number Street Alexandria, VA 22313-2032 City State ZIP Code	Last 4 digits of account number <u>6 6 2 3</u> When was the debt incurred? <u>2/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$5,959.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.16</b>	Self INC/Lead Bank Community Bank Nonpriority Creditor's Name Attn: Bankruptcy 1801 Main St Number Street Kansas City, MO 64108 City State ZIP Code	Last 4 digits of account number <u>6 7 2 7</u> When was the debt incurred? <u>7/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$267.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditLineSecured</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

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**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.17</b>	Synchrony Bank/Gap Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code	Last 4 digits of account number <u>7 1 1 0</u> When was the debt incurred? <u>8/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$37.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.18</b>	Synchrony/PayPal Credit Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code	Last 4 digits of account number <u>9 3 9 8</u> When was the debt incurred? <u>10/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$102.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.19</b>	Today Card Nonpriority Creditor's Name Attn: Bankruptcy PO Box 84032 Number Street Columbus, GA 31908-4032 City State ZIP Code	Last 4 digits of account number <u>7 9 1 4</u> When was the debt incurred? <u>2/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$30.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

**Bige**

**Monyea**

**Chambers**

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**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.20</b>	Truist Bank Nonpriority Creditor's Name Attn: Bankruptcy 214 N Tryon St Number Street Charlotte, NC 28202-1078 City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$110,849.19
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.21</b>	WSFS Bank Nonpriority Creditor's Name 500 Delaware Ave Number Street Wilmington, DE 19801-1490 City State ZIP Code	Last 4 digits of account number <u>1 6 6 2</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$636.30
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Legal Judgment</u>			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Overdrafted Bank Account</u>			

Debtor 1

**Bige****Monyea****Chambers**Case number (if known) 24-10788

First Name

Middle Name

Last Name

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

**Total claim****Total claims from Part 1**

6a.	<b>Domestic support obligations</b>	6a.	<u>\$0.00</u>
6b.	<b>Taxes and certain other debts you owe the government</b>	6b.	<u>\$372,204.79</u>
6c.	<b>Claims for death or personal injury while you were intoxicated</b>	6c.	<u>\$0.00</u>
6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	<b>+</b> <u>\$0.00</u>
6e.	<b>Total.</b> Add lines 6a through 6d.	6e.	<u><u>\$372,204.79</u></u>

**Total claim****Total claims from Part 2**

6f.	<b>Student loans</b>	6f.	<u>\$0.00</u>
6g.	<b>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</b>	6g.	<u>\$0.00</u>
6h.	<b>Debts to pension or profit-sharing plans, and other similar debts</b>	6h.	<u>\$0.00</u>
6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	<b>+</b> <u>\$1,317,770.17</u>
6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	<u><u>\$1,317,770.17</u></u>



Fill in this information to identify your case:

Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Pennsylvania</u>		
Case number (if known)	<u>24-10788</u>		

☐ Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<u>Blair Mill #1 Associates</u> Name <u>409 Stenton Ave</u> Number Street <u>Flourtown, PA 19031-1327</u> City State ZIP Code	3855 Blair Mill Rd 201-P, Horsham, PA 19044 Contract to be ASSUMED
2.2	_____ Name _____ Number Street _____ City State ZIP Code	
2.3	_____ Name _____ Number Street _____ City State ZIP Code	
2.4	_____ Name _____ Number Street _____ City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern</u>	District of	<u>Pennsylvania</u>
Case number (if known)	<u>24-10788</u>		

☐ Check if this is an amended filing

## Official Form 106H

## Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a code debtor.)

☐ No  
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.  
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☐ No  
☐ Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

\_\_\_\_\_  
 Name of your spouse, former spouse, or legal equivalent

\_\_\_\_\_  
 Number Street

\_\_\_\_\_  
 City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a code debtor if your spouse is filing with you. List the person shown in line 2 again as a code debtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your code debtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

- 3.1 Acollective Consulting, LLC

Name

National Registered Agents, Inc.

116 Pine St Ste 320 3rd Floor

Number Street

Harrisburg, PA 17101-1244

City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☒ Schedule E/F, line 4.3

☐ Schedule G, line \_\_\_\_\_

- 3.2 Wilmer, Christina

Name

1343 Parish Ave

Number Street

Claymont, DE 19703-3334

City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☒ Schedule E/F, line 4.21

☐ Schedule G, line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Pennsylvania</u>		
Case number (if known)	<u>24-10788</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

## Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Employment

## 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

## Employment status

## Occupation

## Employer's name

## Employer's address

## Debtor 1

## Debtor 2 or non-filing spouse

☐ Employed ☒ Not Employed☐ Employed ☐ Not Employed

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number Street

Number Street

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City State Zip Code

City State Zip Code

How long employed there? \_\_\_\_\_

\_\_\_\_\_

## Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

2. \$0.00 \$0.00

3. **Estimate and list monthly overtime pay.**

3. + \$0.00 + \$0.00

4. **Calculate gross income.** Add line 2 + line 3.

4. \$0.00 \$0.00

Debtor 1 Bige Monyea Chambers Case number (if known) 24-10788  
 First Name Middle Name Last Name

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....→	4.	\$0.00	\$0.00
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00
5e. Insurance	5e.	\$0.00	\$0.00
5f. Domestic support obligations	5f.	\$0.00	\$0.00
5g. Union dues	5g.	\$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$46,477.09	\$0.00
8b. Interest and dividends	8b.	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00
8d. Unemployment compensation	8d.	\$0.00	\$0.00
8e. Social Security	8e.	\$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	\$0.00
8g. Pension or retirement income	8g.	\$0.00	\$0.00
8h. Other monthly income. Specify: _____	8h. +	\$0.00	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$46,477.09	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$46,477.09	\$0.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +	\$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12.	\$46,477.09	\$46,477.09
<b>Combined monthly income</b>			
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain:			

Debtor 1	<b>Bigge</b>	<b>Monyea</b>	<b>Chambers</b>	Case number (if known) <u>24-10788</u>
	First Name	Middle Name	Last Name	

8a. Attached Statement

**Business Income (09/01/2023 - 03/12/2024)**

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income:	<u>\$88,698.18</u>
--------------------------	--------------------

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

2. Ordinary and necessary expense		<u>\$1,087.54</u>	
3. Net Employee Payroll (Other than debtor)		<u>\$30,681.20</u>	
4. Payroll Taxes		<u>\$0.00</u>	
5. Unemployment Taxes		<u>\$0.00</u>	
6. Worker's Compensation		<u>\$0.00</u>	
7. Other Taxes		<u>\$0.00</u>	
8. Inventory Purchases (Including raw materials)		<u>\$259.37</u>	
9. Purchase of Feed/Fertilizer/Seed/Spray		<u>\$0.00</u>	
10. Rent (Other than debtor's principal residence)		<u>\$0.00</u>	
11. Utilities		<u>\$520.20</u>	
12. Office Expenses and Supplies		<u>\$979.40</u>	
13. Repairs and Maintenance		<u>\$3.40</u>	
14. Vehicle Expenses		<u>\$3,361.95</u>	
15. Travel and Entertainment		<u>\$1,232.38</u>	
16. Equipment Rental and Leases		<u>\$0.00</u>	
17. Legal/Accounting/Other Professional Fees		<u>\$0.00</u>	
18. Insurance		<u>\$2,624.29</u>	
19. Employee Benefits (e.g., pension, medical, etc.)		<u>\$525.90</u>	
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts			
TOTAL PAYMENTS TO SECURED CREDITORS		<u>\$0.00</u>	
21. Other Expenses			
Meals	<u>\$936.27</u>		
Advertising & Marketing	<u>\$9.19</u>		
TOTAL OTHER EXPENSES		<u>\$945.46</u>	
22. TOTAL MONTHLY EXPENSES(Add item 2 - 21)			<u>\$42,221.09</u>

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1)	<u>\$46,477.09</u>
--	--------------------

Fill in this information to identify your case:

Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Pennsylvania</u>		
Case number (if known)	<u>24-10788</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☒ No
- ☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$1,650.00

If not included in line 4:

4a. Real estate taxes	4a. <u>\$0.00</u>
4b. Property, homeowner's, or renter's insurance	4b. <u>\$50.00</u>
4c. Home maintenance, repair, and upkeep expenses	4c. <u>\$0.00</u>
4d. Homeowner's association or condominium dues	4d. <u>\$0.00</u>

Debtor 1	<b>Bigge</b>	<b>Monyea</b>	<b>Chambers</b>	Case number (if known) <u>24-10788</u>
	First Name	Middle Name	Last Name	

		Your expenses
5. <b>Additional mortgage payments for your residence</b> , such as home equity loans	5.	\$0.00
6. <b>Utilities:</b>		
6a. Electricity, heat, natural gas	6a.	\$225.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$250.00
6d. Other. Specify: _____	6d.	\$0.00
7. <b>Food and housekeeping supplies</b>	7.	\$1,000.00
8. <b>Childcare and children's education costs</b>	8.	\$0.00
9. <b>Clothing, laundry, and dry cleaning</b>	9.	\$275.00
10. <b>Personal care products and services</b>	10.	\$225.00
11. <b>Medical and dental expenses</b>	11.	\$200.00
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$300.00
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	\$200.00
14. <b>Charitable contributions and religious donations</b>	14.	\$0.00
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	\$0.00
15b. Health insurance	15b.	\$0.00
15c. Vehicle insurance	15c.	\$600.00
15d. Other insurance. Specify: _____	15d.	\$0.00
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$0.00
17. <b>Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a.	\$0.00
17b. Car payments for Vehicle 2	17b.	\$0.00
17c. Other. Specify: _____	17c.	\$0.00
17d. Other. Specify: _____	17d.	\$0.00
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	\$0.00
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19.	\$0.00
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Debtor 1      **Bige**      **Monyea**      **Chambers**  
 First Name      Middle Name      Last Name

Case number (if known) 24-10788

21. **Other.** Specify: \_\_\_\_\_

21.      +      \$0.00

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a.      \$4,975.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b.      \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c.      \$4,975.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a.      \$46,477.09

23b. Copy your monthly expenses from line 22c above.

23b.      -      \$4,975.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c.      \$41,502.09

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.  
☐ Yes.

None



Fill in this information to identify your case:

Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Pennsylvania</u>		
Case number (if known)	<u>24-10788</u>		

☐ Check if this is an amended filing

## Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

### Part 1: Summarize Your Assets

#### 1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	<u>\$0.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	<u>\$52,430.08</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	<u>\$52,430.08</u>

#### Your assets

Value of what you own

### Part 2: Summarize Your Liabilities

#### 2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of *Schedule D*..... \$33,947.00

#### 3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F*..... \$372,204.79

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F*..... **+** \$1,317,770.17

#### Your total liabilities

\$1,723,921.96

#### Your liabilities

Amount you owe

### Part 3: Summarize Your Income and Expenses

#### 4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of *Schedule I*..... \$46,477.09

#### 5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of *Schedule J*..... \$4,975.00

Debtor 1 Bigge Monyea Chambers Case number (if known) 24-10788  
 First Name Middle Name Last Name

**Part 4:** Answer These Questions for Administrative and Statistical Records

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$54,531.38

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

**Total claim**

**From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$372,204.79</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+</b> <u>\$0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.	<u>\$372,204.79</u>

Fill in this information to identify your case:

Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Pennsylvania</u>		
Case number (if known)	<u>24-10788</u>		

☐ Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /s/ Bige Monyea Chambers  
Bige Monyea Chambers, Debtor 1

Date 04/02/2024  
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Bige</u>	<u>Monyea</u>	<u>Chambers</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Pennsylvania</u>		
Case number (if known)	<u>24-10788</u>		

☐ Check if this is an amended filing

## Official Form 107

# Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Give Details About Your Marital Status and Where You Lived Before

#### 1. What is your current marital status?

- ☒ Married
- ☐ Not married

#### 2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
- ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

#### 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
- ☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

### Part 2: Explain the Sources of Your Income

#### 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
- ☒ Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income	Gross Income	Sources of income	Gross Income
Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

From January 1 of current year until the date you filed for bankruptcy:

- ☐ Wages, commissions, bonuses, tips
- ☒ Operating a business

\$231,494.50

- ☐ Wages, commissions, bonuses, tips
- ☐ Operating a business

Debtor 1	<b>Bige</b>	<b>Monyea</b>	<b>Chambers</b>	Case number (if known) <u>24-10788</u>
	First Name	Middle Name	Last Name	

  

<b>For last calendar year:</b> (January 1 to December 31, <u>2023</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips	<input type="checkbox"/> Wages, commissions, bonuses, tips
<input checked="" type="checkbox"/> Operating a business	<u>\$415,900.00</u>	<input type="checkbox"/> Operating a business

  

<b>For the calendar year before that:</b> (January 1 to December 31, <u>2022</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips	<input type="checkbox"/> Wages, commissions, bonuses, tips
<input checked="" type="checkbox"/> Operating a business	<u>\$88,987.00</u>	<input type="checkbox"/> Operating a business

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

- ☒ No
- ☐ Yes. Fill in the details.

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more?
- ☐ No. Go to line 7.
- ☐ Yes. List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.
- \* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.
- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**
- During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?
- ☒ No. Go to line 7.
- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☒ No
- ☐ Yes. List all payments to an insider.

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
- ☐ Yes. List all payments that benefited an insider.

Debtor 1 **Bige** **Monyea** **Chambers** Case number (if known) 24-10788

First Name Middle Name Last Name

**Part 4:** Identify Legal Actions, Repossessions, and Foreclosures

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No

☒ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
<p>Case title <u>710 SPROUL LP et al v. ACOLLECTIVE, INC. et al</u></p> <p>Case number <u>CV-2020-006528</u></p>	Breach of Contract; Default judgment in the amount of \$1,134,983.10	<p>Delaware County Court of Common Pleas</p> <p>Court Name</p> <p><u>201 W Front St</u></p> <p>Number Street</p> <p><u>Media, PA 19063-2708</u></p> <p>City State ZIP Code</p>	<p><input type="checkbox"/> Pending</p> <p><input type="checkbox"/> On appeal</p> <p><input checked="" type="checkbox"/> Concluded</p>
<p>Case title <u>Truist Bank v. Acollective Consulting LLC et al</u></p> <p>Case number <u>CV-2023-008845</u></p>	Defaulted Loan; Judgment in the amount of \$110,849.19	<p>Delaware County Court of Common Pleas</p> <p>Court Name</p> <p><u>201 W Front St</u></p> <p>Number Street</p> <p><u>Media, PA 19063-2708</u></p> <p>City State ZIP Code</p>	<p><input type="checkbox"/> Pending</p> <p><input type="checkbox"/> On appeal</p> <p><input checked="" type="checkbox"/> Concluded</p>

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

☒ No. Go to line 11.

☐ Yes. Fill in the information below.

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

☒ No

☐ Yes. Fill in the details.

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

☒ No

☐ Yes

**Part 5:** List Certain Gifts and Contributions

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

☒ No

☐ Yes. Fill in the details for each gift.

Debtor 1 **Big** **Monyea** **Chambers** Case number (if known) 24-10788  
 First Name Middle Name Last Name

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No  
☐ Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No  
☐ Yes. Fill in the details.

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No  
☒ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Cibik Law, P.C. Person Who Was Paid 1500 Walnut Street Suite 900 Number Street  Philadelphia, PA 19102 City State ZIP Code mail@cibiklaw.com Email or website address  Person Who Made the Payment, if Not You	Attorney's Fee	03/06/2024	\$10,575.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1	<b>Big</b>	<b>Monyea</b>	<b>Chambers</b>	Case number (if known) 24-10788
	First Name	Middle Name	Last Name	

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?** (These are often called *asset-protection devices*.)

- ☒ No
- ☐ Yes. Fill in the details.

**Part 8:** List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

**20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
- ☐ Yes. Fill in the details.

**21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

- ☒ No
- ☐ Yes. Fill in the details.

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

- ☒ No
- ☐ Yes. Fill in the details.

**Part 9:** Identify Property You Hold or Control for Someone Else

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

- ☒ No
- ☐ Yes. Fill in the details.

**Part 10:** Give Details About Environmental Information

**For the purpose of Part 10, the following definitions apply:**

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

**Report all notices, releases, and proceedings that you know about, regardless of when they occurred.**

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No
- ☐ Yes. Fill in the details.



Debtor 1 **Big** **Monyea** **Chambers** Case number (if known) 24-10788  
 First Name Middle Name Last Name

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

**Part 11:** Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation  
☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Acollective Consulting, LLC  
 Name  
 National Registered Agents, Inc.  
 116 Pine St Ste 320 3rd Floor  
 Number Street  
 Harrisburg, PA 17101-1244  
 City State ZIP Code

Describe the nature of the business

Employer Identification number  
 Do not include Social Security number or ITIN.

Youth Group Home

EIN: \_ \_ - \_ \_ \_ \_ \_

Name of accountant or bookkeeper

Dates business existed

From 01/29/2009 To \_ \_ \_ \_ \_

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No  
☐ Yes. Fill in the details below.

Debtor 1

**Bige**

First Name

**Monyea**

Middle Name

**Chambers**

Last Name

Case number (if known) 24-10788

**Part 12:** Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** /s/ Bige Monyea Chambers  
Signature of Bige Monyea Chambers, Debtor 1

Date 04/02/2024

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).